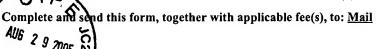
PART B - FEE(S) TRANSMITTAL



Mail Stop ISSUE FEE
Commissioner for Patents

2020				P.O. Box 14	150			
				Alexandria, Virginia 22313-1450 or Fax (703) 746-4000		22313-1450		
5 4/	orm should be used for tran	emitting the ISSI				Blocks 1 through 5 s	hould be completed when	
apercorne All Further co indicated antess corrected maintenance fee notification	orm should be used for tran rrespondence including the below or directed otherwise ins.	Patent, advance or in Block 1, by (a	rders and not a) specifying	ification of maintenance a new correspondence	fees will be address; and/o	mailed to the current r (b) indicating a sep	correspondence address a arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, muchave its own certificate of mailing or transmission.				
25944 7	7590 06/01/2005			have its own ce	rtificate of ma	ailing or transmission.	cht of formal drawing, int	
OLIFF & BERR P.O. BOX 19928 ALEXANDRIA, V /2005 MBEYENE2 00000	VA 22320			I hereby certify States Postal S addressed to t transmitted to t	Certificat that this Fee ervice with su ne Mail Stop he USPTO (70	e of Mailing or Tran (s) Transmittal is bein fficient postage for fit ISSUE FEE address 03) 746-4000, on the	smission g deposited with the Unit st class mail in an envelo above, or being facsim date indicated below.	
:1501	1400.00 DP						(Depositor's name	
:1504	300.00 GP						(Signatur	
APPLICATION NO.	FILING DATE	FIRST NAMED IN		D INVENTOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/665,112 09/22/2003		Mitsuru Nagai			105033.01	5425		
APPLN. TYPE	SMALL ENTITY		ISSUE FEE		E TO	OTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional NO		\$1400			\$1700	09/01/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	<u></u>			
NGUYEN, TAI V		3729		000 00000				
1. Change of correspondence	ce address or indication of "Fe		2. For prin	029-025350 nting on the patent front		Ω1iff 8		
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363. Change of correspondence CFR 1.363. "Fee Address" indication of the control of the correspondence	ce address or indication of "Formula dence address" (or Change of 22) attached. Ition (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B as an assignee is identified be n 37 CFR 3.11. Completion	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO	2. For prii (1) the na or agents (2) the na registered 2 registere listed, no THE PATEN data will app T a substitute	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and to depatent attorneys or agname will be printed. If (print or type) ear on the patent. If ar for filing an assignment	d patent attor ing as a meml he names of t ents. If no name	ber a 2 up to ne is 3 dentified below, the c		
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). "Fee Address" indication PTO/SB/47; Rev 03-02. Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNAME CORRESPONDENCE	ce address or indication of "Fordence address (or Change of 22) attached. attion (or "Fee Address" Indication more recent) attached. Use D RESIDENCE DATA TO B is an assignee is identified by a 37 CFR 3.11. Completion deep	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON 7 clow, no assignee of this form is NO	2. For prii (1) the na or agents (2) the na registered 2 registered isted, no THE PATEN data will app T a substitute (3) RESIDENC	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and i d patent attorneys or ag name will be printed. I (print or type) ear on the patent. If ar for filing an assignment CE: (CITY and STATE O	d patent attor ing as a meml he names of t ents. If no name	ber a 2 up to ne is 3 dentified below, the c		
1. Change of correspondence CFR 1.363). Change of correspon Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth i (A) NAME OF ASSIGN	de address or indication of "Fordence address (or Change of 22) attached. Ition (or "Fee Address" Indication (or "Fee Address" Indication (or more recent) attached. Use Description of the Indication of Indication	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO	2. For prii (1) the na or agents (2) the na registered 2 registered isted, no THE PATEN data will app T a substitute (3) RESIDENC	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and id patent attorneys or agname will be printed. If (print or type) The patent if an assignment of filing an assignment of the patent. If a for filing an assignment of the patent of the patent. If a for filing an assignment of the patent of the pat	d patent attor ing as a meml he names of t ents. If no nan assignee is i	theys ber a 2 up to a 3 dentified below, the core	locument has been filed f	
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). The change of correspondence CFR 1.363. "Fee Address" indication of the control of the cont	de address or indication of "Fordence address (or Change of 22) attached. Attion (or "Fee Address" Indication (or "Fee Address" Indication (or more recent) attached. Use the control of	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO (E	2. For print (1) the nation of agents (2) the nating registered 2 registered 1 registered (2) the PATEN data will app T a substitute (3) RESIDENC TOK	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and the patent attorneys or agname will be printed. If (print or type) ear on the patent. If ar for filling an assignment CE: (CITY and STATE OR TAPAN Patent): Individual	d patent attor ing as a meml he names of t ents. If no nan assignee is i	theys ber a 2 up to a 3 dentified below, the core	locument has been filed f	
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). Change of correspondence CFR 1.363. "Fee Address" indication PTO/SB/47; Rev 03-02. Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unlessecordation as set forth in (A) NAME OF ASSIGNEE CORRESPONDENCE COR	de address or indication of "Fordence address (or Change of 22) attached. Attion (or "Fee Address" Indication (or "Fee Address" Indication (or more recent) attached. Use the control of	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Tellow, no assignee of this form is NO (E	2. For prii (1) the na or agents (2) the na registered 2 registered 1 registered 2 registered 3 registered 3 registered THE PATEN data will app T a substitute TOK TOK	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and independent attorneys or agname will be printed. If (print or type) The patent if an assignment of filing an assignment of the patent. If ar for filing an assignment of the patent is a single patent or type) The patent is a single patent of the patent in the patent is a single patent or type. The patent is a single patent of the patent in the patent is a single patent in the patent	d patent attor ing as a meml he names of t ents. If no nar assignee is i	ber a 2 up to ne is 3 dentified below, the co	oup entity Governme	
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN SEIKO EPSON CO Please check the appropriate 4a. The following fee(s) are Existsue Fee	de address or indication of "Fordence address (or Change of 22) attached. Attion (or "Fee Address" Indication (or "Fee Address" Indication (or more recent) attached. Use the control of	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Tellow, no assignee of this form is NO (E	2. For prii (1) the na or agents (2) the na registered 2 registered iisted, no THE PATEN data will app T a substitute B) RESIDENC TOK	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and the patent attorneys or agname will be printed. If (print or type) ear on the patent. If ar for filling an assignment CE: (CITY and STATE OR TAPAN Patent): Individual	d patent attor ing as a meml he names of tents. If no nar assignee is i OR COUNTR Corporat s) is enclosed	tion or other private gr	locument has been filed f	
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). "Fee Address" indicate PTO/SB/47; Rev 03-02. Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unlessecordation as set forth in (A) NAME OF ASSIGNEE CASSIGNEE CONTROL CONTR	ce address or indication of "Fordence address (or Change of 22) attached. Intion (or "Fee Address" Indicator more recent) attached. Use the properties of t	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO (E	2. For prii (1) the na or agents (2) the na registered 2 registered 1 registered 2 registered 3 registered THE PATEN data will app T a substitute TOK TOK	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and id patent attorneys or agname will be printed. If (print or type) ear on the patent. If ar for filling an assignment of the filling an assignment of the fee(s): Individual Fee(s): In the amount of the feet by credit card. Form PT	d patent attor ing as a meml he names of tents. If no nar assignee is i OR COUNTR Corporat s) is enclosed O-2038 is att.	tion or other private grached.	oup entity Government (\$1,700)	
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). "Fee Address" indicate PTO/SB/17; Rev 03-02. Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unlest P	dence address or indication of "Fordence address" (or Change of 22) attached. Attion (or "Fee Address" Indicator more recent) attached. Use the control of	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO (E	2. For prii (1) the na or agents (2) the na registered 2 registered 1 registered 2 registered 3 registered 5 registered TOK TOK TOK TOK A check Payment of Payment Deposit Acce	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and id patent attorneys or agname will be printed. If (print or type) ear on the patent. If ar for filling an assignment CE: (CITY and STATE (CYO, JAPAN) The patent in the amount of the feel by credit card. Form PT extor is hereby authorized ount Number 15-04	d patent attor ing as a meml he names of tents. If no nar assignee is i OR COUNTR Corporat (s) is enclosed O-2038 is att. d by charge to	tion or other private gr ck #170277 ached. the required fee(s), or (enclose an extra co	oup entity Government (\$1,700) credit any overpayment, copy of this form).	
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth i (A) NAME OF ASSIGN SEIKO EPSON CO Please check the appropriat 4a. The following fee(s) are Russue Fee Rublication Fee (No. Advance Order - # o 5. Change in Entity Status a. Applicant claims S	ce address or indication of "Fordence address (or Change of 22) attached. Intion (or "Fee Address" Indicator more recent) attached. Use the property of the p	cee Address" (37 Correspondence ation form the of a Customer E PRINTED ON The colon, no assignee of this form is NO (Euries (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of	2. For prii (1) the na or agents (2) the na registered 2 registered 2 registered iisted, no THE PATEN data will app T a substitute B) RESIDENC TOK inted on the p D. Payment of A check Payment Deposit Acc	nting on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and id patent attorneys or agname will be printed. If (print or type) The car on the patent. If ar for filing an assignment of filing an assignment of the feet of the patent of the feet out of the feet of the feet out of the feet of the feet of the feet out	d patent attor ing as a meml he names of u ents. If no nar assignee is i OR COUNTR Corporat (s) is enclosed O-2038 is att. d by charge t	tion or other private gr ck #170277 ached. the required fee(s), or (enclose an extra c	oup entity Government (\$1,700) credit any overpayment, sopy of this form).	
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). "Fee Address" indication of the Control of the Control of the CFR 1.363). "Fee Address" indication of the CFR 1.363). 3. ASSIGNEE NAME ANITED PLEASE NOTE: Unless recordation as set forth in the CFR 1.363. (A) NAME OF ASSIGNOIS SEIKO EPSON CONTROL OF CONT	dence address or indication of "Fordence address" (or Change of 22) attached. Attion (or "Fee Address" Indicator more recent) attached. Use the control of	cee Address" (37 Correspondence ation form the of a Customer E PRINTED ON The colon, no assignee of this form is NO (Euries (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of the properties (will not be properties) and the properties of	2. For prii (1) the na or agents (2) the na registered 2 registered 2 registered iisted, no THE PATEN data will app T a substitute B) RESIDENC TOK inted on the p D. Payment of A check Payment Deposit Acc	thing on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and id patent attorneys or agname will be printed. If (print or type) the area on the patent. If are for filing an assignment of filing an assignment of the patent. If (CITY and STATE OF TATE O	d patent attor ing as a memble names of tents. If no nar assignee is i DR COUNTR S) is enclosed O-2038 is att. d, by charge to g SMALL EN eviously paid t; a registered	dentified below, the company of the required fee(s), or end of	oup entity Government (\$1,700) credit any overpayment, to opp of this form). FR 1.27(g)(2).	
1. Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). Change of correspondence CFR 1.363). "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNET CONTENT CONTE	dence address or indication of "Formattion of "Formattion (or "Fee Address" Indicator more recent) attached. Use the properties of the pro	cee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO (E ries (will not be pr 4t 2d) 37 CFR 1.27. The Fee and Publicate will not be accepteent and Trademark	2. For prii (1) the na or agents (2) the na registered 2 registered 2 registered iisted, no THE PATEN data will app T a substitute B) RESIDENC TOK inted on the p D. Payment of A check Payment Deposit Acc	thing on the patent front mes of up to 3 registere OR, alternatively, me of a single firm (hav attorney or agent) and id patent attorneys or agname will be printed. If (print or type) ear on the patent. If ar for filing an assignment of filing an assignment of the feet (CITY and STATE	d patent attor ing as a memble names of tents. If no nar assignee is i DR COUNTR S) is enclosed O-2038 is att. d, by charge to g SMALL EN eviously paid t; a registered	tion or other private gr ck #170277 ached. the required fee(s), or (enclose an extra compared to the application attorney or agent; or the compared to the application or other private gr ITITY status. See 37 Compared to the application or other private gr 29, 2005	oup entity Governme 7 (\$1,700) credit any overpayment, copy of this form).	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.